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FOR COURT USE ONLY

2014 AUG -8 P 12:41

CLERK OF COURT
COUNTY OF CONTRA COSTA
CLERK

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State bar number and address) Troy C. Bailey, State Bar No. 277424 THE CHANLER GROUP 2560 Ninth Street, Parker Plaza, Suite 214 Berkeley, CA 94710 TELEPHONE NO (510) 848-8880 FAX NO (Optional) (510) 848-8118 E-MAIL ADDRESS (Optional) troy@chanler.com ATTORNEY FOR (Name) Plaintiff, Anthony E. Held, Ph.D., P.E.		CASE NUMBER C 14-01281
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Contra Costa STREET ADDRESS 725 Court Street MAILING ADDRESS CITY AND ZIP CODE Martinez, CA 94553 BRANCH NAME Unlimited Civil		
PLAINTIFF/PETITIONER: Anthony E. Held, Ph.D., P.E. DEFENDANT/RESPONDENT: Merck & Co., Inc., et al.		
REQUEST FOR DISMISSAL <input type="checkbox"/> Personal Injury, Property Damage, or Wrongful Death <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other <input type="checkbox"/> Family Law <input type="checkbox"/> Eminent Domain <input checked="" type="checkbox"/> Other (specify): Health and Safety Code § 25249.6 et seq. (Prop 65) - A conformed copy will not be returned by the clerk unless a method of return is provided with the document. -		

1. TO THE CLERK: Please dismiss this action as follows:
- a. (1) ☐ With prejudice (2) ☒ Without prejudice
 - b. (1) ☒ Complaint (2) ☐ Petition
 - (3) ☐ Cross-complaint filed by (name): on (date):
 - (4) ☐ Cross-complaint filed by (name): on (date):
 - (5) ☐ Entire action of all parties and all causes of action
 - (6) ☐ Other (specify):*

2. (Complete in all cases except family law cases.)
☐ Court fees and costs were waived for a party in this case. (This information may be obtained from the clerk. If this box is checked, the declaration on the back of this form must be completed).
Date: August 8, 2014

Troy C. Bailey
(TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)
"If dismissal requested is of specified parties only or of specified causes of action only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed."
Attorney or party without attorney for:
☐ Plaintiff/Petitioner ☐ Defendant/Respondent
☐ Cross-Complainant

3. TO THE CLERK: Consent to the above dismissal is hereby given **
Date:
(TYPE OR PRINT NAME OF ☐ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)
"If a cross-complaint - or Response (Family Law) seeking affirmative relief - is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 583 (l) or (j)."
Attorney or party without attorney for:
☐ Plaintiff/Petitioner ☐ Defendant/Respondent
☐ Cross-Complainant

(To be completed by clerk)
4. ☒ Dismissal entered as requested on (date): AUG 8 2014
5. ☐ Dismissal entered on (date): as to only (name):
6. ☐ Dismissal not entered as requested for the following reasons (specify):
7. a. ☐ Attorney or party without attorney notified on (date):
b. ☐ Attorney or party without attorney not notified. Filing party failed to provide
☐ a copy to be conformed ☐ means to return conformed copy

Date: AUG 8 2014 Clerk, by Deputy

PLAINTIFF/PETITIONER: Anthony E. Held, Ph.D., P.E.
 DEFENDANT/RESPONDENT: Merck & Co., Inc., et al.

CASE NUMBER:
 C 14-01281

Declaration Concerning Waived Court Fees

The court has a statutory lien for waived fees and costs on any recovery of \$10,000 or more in value by settlement, compromise, arbitration award, mediation settlement, or other recovery. The court's lien must be paid before the court will dismiss the case.

1. The court waived fees and costs in this action for (name):
2. The person in item 1 (check one):
 - a. ☐ is not recovering anything of value by this action.
 - b. ☐ is recovering less than \$10,000 in value by this action.
 - c. ☐ is recovering \$10,000 or more in value by this action. (If item 2c is checked, item 3 must be completed.)
3. ☐ All court fees and costs that were waived in this action have been paid to the court (check one): ☐ Yes ☐ No

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

(TYPE OR PRINT NAME OF ☐ ATTORNEY ☐ PARTY MAKING DECLARATION)

(SIGNATURE)

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PROOF OF SERVICE

I am employed in the County of Alameda, State of California. I am a citizen of the United States, over the age of eighteen (18) years, and not a party to the within action. My business address is 2560 Ninth Street, Parker Plaza, Suite 214, Berkeley, California 94710-2565.

On August 8, 2014, I caused the following document(s) to be served, described as:

REQUEST FOR DISMISSAL

on each interested party as follows:

Judith Praitis, Esq.
Sidley Austin LLP
555 West Fifth Street
Los Angeles, CA 90013
Attorneys for Merck & Co., Inc.

XXXXX (BY MAIL) I placed a true and correct copy of the foregoing document(s) in a sealed envelope addressed to each interested party as set forth above. I placed each such envelope, with postage thereon fully prepaid, for collection and mailing at The Chanler Group, located in Berkeley, California. I am readily familiar with The Chanler Group's practice for collection and processing of documents for mailing with the United States Postal Service. Under that practice, the documents are deposited with the United States Postal Service on the same day in the ordinary course of business.

Executed this 8th of August 2014, at Berkeley, California, I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.


Roz Conrad